



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R9/11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

(CFA-4)
Summary Sheet

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☒ Yes ☐ No

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

14

COMMITTEE INFORMATION

1. Full name of committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name STEVE DILLINGER ELECTION COMMITTEE	
2. Acronym or abbreviated name, if any N/A	3. Committee telephone number (317) 574-0700
4. Mailing address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address 9247 N. Meridian St. Suite 200	
5. City, state, ZIP code Indianapolis, In	6. Party affiliation (if applicable) REPUBLICAN

CANDIDATE INFORMATION (For Candidate's Committees Only)

7. Full name of candidate (include any nickname) Steven C. Dillinger	8. Party affiliation or if independent Republican
9. Office sought (include district number, if any. Not required for exploratory committee.) Hamilton County Commissioner	10. County of residence Hamilton

TYPE OF REPORT

11. Check one:
☐ Pre-Primary ☒ Pre-Election ☐ Annual ☐ Final / Disbands Committee (lines 18, 19, and 20 must be '0')
☐ Outgoing Treasurer (within 10 days amend Statement of Organization)

CONVENTION CANDIDATES ONLY

Check one:
☐ Pre-Convention
☐ Post-Convention

12. Reporting period: From: April 8, 2000 Through: October 13, 2000	COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	50,544.50	
14. Cash on hand and investments January 1, current year.		29,080.52

CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)	18,645.00	59,220.00
15b. Unitemized	2,350.00	4,325
15c. Add lines 15a. and 15b in both columns	20,995.00	63,545.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	71,539.50	92,625.52

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)	53,009.64	74,095.66
17b. Unitemized	0	0
17c. Add lines 17a and 17b in both columns	53,009.64	74,095.66
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL	18,529.86	18,529.86
19. Debts OWED BY the committee (use Schedule D)	0	
20. Debts OWED TO the committee (use Schedule E)	0	

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature on File

FOR OFFICE USE ONLY

BOOK ALIGNED NOTATION TEST

[Signature]

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)

2000 NO 3-AH 8-54

FILED

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4806 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other
Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly in BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. If cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 1 of 2

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. MICHAEL BROWNING 251 N. ILLINOIS ST. STE 200 INDIANAPOLIS, IN 46204 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,000.00	\$1,000.00	4-14-00 Treasurer
2. PAT & RICHARD WEAVER 21450 OAKVIEW DRIVE NOBLESVILLE, IN 46060 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$250.00	\$250.00	4-21-00 Treasurer
3. NORMAN WILKINS 2714 KNOLLWOOD DRIVE INDIANAPOLIS, IN 46208 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$150.00	\$150.00	4-11-00 Treasurer
4. JAMES C. FEHSENFELD 8001 SPRINGMILL ROAD INDIANAPOLIS, IN Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$200.00	\$200.00	4-20-00 Treasurer
5. BRIAN GLAZE SOUTH BEND, IN Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$950.00	\$950.00	4-27-00 Treasurer
SUB TOTAL THIS PAGE OF SCHEDULE A		\$2,550.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other
Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly in BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER

Page 2 of 2

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. ROBERT T. KIRKLEY 389 LARIMAR TRAK VALPARAISO, IN 46383 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$950.00	\$950.00	4-27-00 Treasurer
2. MICHAEL & VICKI KEEVEN 9940 SOUTHWIND DRIVE INDIANAPOLIS, IN 46266 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$950.00	\$950.00	4-27-00 Treasurer
3. TOM HOSTON 4450 N. WASHINGTON BLVD. INDIANAPOLIS, IN 46205 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$500.00	\$500.00	5-23-00 Treasurer
4. GEORGE SWEET 12722 HAMILTON CROSSING BLVD. CARMEL, IN 46032 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$500.00	\$500.00	5-23-00 Treasurer
5. WILLIS R. CONNER 4165 Millersville Road Indianapolis, IN 46205 Contributor's Occupation (if required)	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$950.00	\$950.00	4-27-00 Treasurer
SUB TOTAL THIS PAGE OF SCHEDULE A		\$3850.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4808 (R9 / 11-99)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly in BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER	
Page 1	of 1

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
PLATINUM PROPERTIES, LLC 9551 DELEGATES ROW INDIANAPOLIS, IN 46240	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$500.00	\$500.00	4-22-00 Treasurer
BEAM, LONGEST & NEFF, LLC 8126 CASTLETON ROAD INDIANAPOLIS IN 46250	Contributions: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$4,995.00	\$4,995.00	4-29-00 Treasurer
COLE ASSOCIATES, INC. 2211 EAST JEFFERSON BLVD. SOUTH BEND, IN 46615	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$950.00	\$950.00	4-27-00 Treasurer
KITE DEVELOPMENT CORPORATION 6610 N. SHADELAND AVE. INDIANAPOLIS, IN 46220	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$350.00	\$350.00	5-4-00 Treasurer
DLZ LABORTORIES, INC. 6121 HUNTLEY ROAD COLUMBUS, OH 43229	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$1,200.00	\$1,200.00	5-18-00 Treasurer
SUB TOTAL THIS PAGE OF SCHEDULE A		7,995.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE B) Itemized Expenditures

FILE NUMBER

Page 1 of 3

INSTRUCTIONS: Please type or print legibly in BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, for a party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) must be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
10 ADVERTISING VISIONS, INC. 10585 N. MERIDIAN ST. INDIANAPOLIS, IN		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: TV SPOTS STAR ADS	\$39216.32	\$56057.87	4-20-00
10 IDEA'S AT WORK HERRIMAN BLVD. NOBLESVILLE, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: NAME BADGES	\$121.15	\$702.66	4-11-00
10 JIM DANDY CONNER STREET NOBLESVILLE, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: DINNER FOR SIGN CREW	\$181.47	\$181.47	4-12-00
10 SHERI RUSHFORTH HANNABLE STREET NOBLESVILLE, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: SIGN DISTRIBUTION COST	\$500.00	\$500.00	4-12-00
10 POSTMASTER PLEASANT STREET NOBLESVILLE, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: POSTAGE	\$264.00	\$429.00	7-19-00
10 JEFF RUSHFORTH HANNABLE STREET NOBLESVILLE, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: GAS FOR SIGN CREW	\$600.00	\$600.00	5-1-00
10 TEAM, LONGEST & NEFF 3126 CASTLETON ROAD INDIANAPOLIS, IN		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: MAIL-OUT PIECE	\$2,249.99	\$2249.99	4-29-00
SUB TOTAL THIS PAGE OF SCHEDULE B			\$		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$43132.95		



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4806 (R9 / 11-99)

Indiana Election Commission (IC 3-9-6-14)

Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE A-2)
CONTRIBUTIONS BY CORPORATIONS
Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly in BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page 2 of 2

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. MCKNIGHT & QUANDT MANAGEMENT CO. 155 E. Market St., Ste 200 Indianapolis, IN 46204	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$ 500.00	\$500.00	4-11-00
2.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
3.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
4.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
5.	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
SUB TOTAL THIS PAGE OF SCHEDULE A		\$500.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R9 / 11-99)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE A-3)
CONTRIBUTIONS BY
LABOR ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or legibly in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations **OVER \$100 per contributor**, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100 per contributor**, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page 1 of 1

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
				RECEIVED BY
NONE	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
SUB TOTAL THIS PAGE OF SCHEDULE A		\$ - 0 -		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4806 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-4)**CONTRIBUTIONS BY****POLITICAL ACTION COMMITTEES****Itemized Contributions and Other Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please print or type in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in-kind contributions regardless of the amount from political action committees **MUST** be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBERPage 1 of 1

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
HOME PAC P.O. BOX 44670 INDIANAPOLIS, IN 46244	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$3,000.00	\$3,000.00	4-19-00 Treasurer
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
SUB TOTAL THIS PAGE OF SCHEDULE A		\$3,000.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		



**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R9 / 11-99)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE A-5)
CONTRIBUTIONS BY
OTHER ORGANIZATIONS**

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print in **BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committees **MUST** be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year, **MUST** be itemized on this schedule (over \$200 if regular party committee).

FILE NUMBER

Page 1 of 1

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
CITIZENS FOR BETTER ROADS P.O. BOX 68123 INDIANAPOLIS, IN 46268	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$500.00	\$500.00	4-11-00 Treasurer
E.D.I.S. 735 NORTH LYNHURST DRIVE INDIANAPOLIS, IN 46224	Contributions: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)	\$250.00	\$250.00	4-26-00 Treasurer
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
	Contributions: <input type="checkbox"/> Direct <input type="checkbox"/> In-Kind (describe) Other Receipts: <input type="checkbox"/> Interest <input type="checkbox"/> Loan <input type="checkbox"/> Misc (specify)			
SUB TOTAL THIS PAGE OF SCHEDULE A		\$750.00		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$		

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4606 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE B)
Itemized Expenditures**

FILE NUMBER

Page 2 of 3

INSTRUCTIONS: Please type or print legibly in BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u>0</u> JUDY DILLINGER 19905 Wagon Trail Dr. Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Copies for Handout	\$33.00	\$33.00	5-3-00
Code <u>0</u> Nobles Elks Lodge South 9th Street Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Victory Party	\$387.00	\$387.00	5-3-00
Code <u>F</u> Get Results, Inc. P.O. Box 3312 Carmel, IN 46032		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Campaign Help	\$630.00	\$2057.20	5-4-00
Code <u>A</u> Metrobank North 9th Street Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	\$1260.00	\$1260.00	5-16-00
Code <u>A</u> Boys & Girls Club of Noblesville Conner Street Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Donation Ad	\$399.00	\$399.00	6-13-00
Code <u>F</u> Kathy Richardson for 29th District State Rep. Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	\$250.00	\$250.00	6-21-00
Code <u>A</u> Noblesville Football League Allisonville Road Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:	\$100.00	\$100.00	7-12-00
SUB TOTAL THIS PAGE OF SCHEDULE B			\$3059.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE B) Itemized Expenditures

FILE NUMBER

Page 3 of 3

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code <u> </u> Dan Stevens for Sheriff Committee Westfield, IN 46074		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Donation	\$1000.00	\$1000.00	7-18-00
Code <u>F</u> Standard Management & Charitable Trust Keystone Crossing Indianapolis, IN		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Donation for Boys Club Fundraiser	\$500.00	\$500.00	7-26-00
Code <u>F</u> Republican Party North 8th Street Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Elephant Open Donation	\$90.00	\$ 90.00	7-7-00
Code <u>O</u> Amsterdam Printing New York City, NY		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Promotional Pins	\$207.71	\$207.71	9-16-00
Code <u> </u> Noblesville High School Alumni Banquet Noblesville, IN 46060		<input checked="" type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Banquet	\$ 25.00	\$ 25.00	4-30-00
Code <u> </u> Beam Longest & Neff, LLC. 8126 Castleton Road Indianapolis, IN 46250		<input type="checkbox"/> Direct <input checked="" type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose: Mailings	\$4995.00	\$4995.00	4-29-00
Code <u> </u>		<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind <input type="checkbox"/> Payment of Debt <input type="checkbox"/> Returned Contribution <input type="checkbox"/> Other Purpose:			
SUB TOTAL THIS PAGE OF SCHEDULE B			\$6817.71		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$3009.64		

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4608 (R9 / 11-99)
Indiana Election Commission (IC 3-9-5-14)
Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions****FILE NUMBER**

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid, political committees supporting or opposing a public question, **MUST** be itemized on this schedule.

Page 1 of 1**PUBLIC QUESTION INFORMATION**

Enter Text of Public Question

Type of Question: ☐ Statewide ☐ Local
Position: ☐ Supported ☐ Opposed

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF EXPENDITURE	PURPOSE OF EXPENDITURE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
NONE	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
	<input type="checkbox"/> Direct <input type="checkbox"/> In-Kind				
SUB TOTAL THIS PAGE OF SCHEDULE C			\$-0-		
TOTAL OF ALL PAGES OF SCHEDULE C ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$-0-		

**REPORT OF RECEIPTS AND EXPENDITURES
OF A POLITICAL COMMITTEE**

State Form 4806 (R9 / 11-99)

Indiana Election Commission (IC 3-9-5-14)

Approved by State Board of Accounts 1999

**(CFA-4 SCHEDULE E)
DEBTS OWED TO THIS COMMITTEE**

FILE NUMBER

Page 1 of 1

INSTRUCTIONS: Please type or print legibly in BLACK INK all information on this form. For assistance in completing schedule, see instructions on the reverse side. List all debts, loans, regardless of amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

Borrower's Name and Mailing Address (street, number, city, state, ZIP code)	Co-Signer's Name and Mailing Address (if any) (street, number, city state, ZIP code)	Original Amount	Date Debt Incurred	Cumulative Paid Year-to-Date	Outstanding Balance This Period			
		Nature of Debt						
NONE								
SUB TOTAL THIS PAGE OF SCHEDULE E					\$ - 0 -			
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet)					\$ - 0 -			